| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | Application or Docket Number 09/785,884 | | Filing Date 02/15/2001 | | To be Mailed | |
|---|--|---|---------------------------------------|---|--|---|--|---|---------------------------|-------------------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY | | | OTHER THAN OR SMALL ENTITY | | |
| Н | FOR | NU | NUMBER FILED | | NUMBER EXTRA | | RATE (\$) | FEE (\$) | | RATE (\$) | FEE (\$) | |
| | BASIC FEE (37 CFR 1 16(a), (b), | or (c)) | N/A | | N/A | | N/A | | 1 | N/A | | |
| | SEARCH FEE (37 CFR 1 16(k), (i), (| or (m)) | N/A | | N/A | 1 | N/A | | 1 | N/A | | |
| | EXAMINATION FE (37 CFR 1 16(o), (p), | E or (q)) | N/A | | N/A | | N/A | | 1 | N/A | | |
| | AL CLAIMS CFR 1.16(i)) | | minus 20 = | | | | X \$ = | | OR | x s = | | |
| IND | EPENDENT CLAIM CFR 1.16(h)) | 1S | minus 3 = | | • | | × \$ = | | 1 | X \$ = | | |
| Ò | APPLICATION SIZE 37 CFR 1.16(s)) | FEE shee is \$25 addit | ts of pape 50 (\$125 ional 50 s | ation and drawin er, the application for small entity) sheets or fraction a)(1)(G) and 37 | n size fee due for each n thereof. See | | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(j)) | | | | | | | | | 1 | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | TOTAL | | | TOTAL | | |
| APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | |
| AMENDMENT | 04/08/2011 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1.16(i)) | - 55 | Minus | ·· 85 | = 0 | | X \$ = | | OR | X \$52= | 0 | |
| | Independent (37 CFR 1,16(h)) | - 9 | Minus | 9 | = 0 | 1 | X \$ = | | OR | X \$220= | 0 | |
| | Application Size Fee (37 CFR 1:16(s)) | | | | | | | | | | | |
| ` | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | 0 | |
| | | (Column 1) | | (Column 2) | (Column 3) | | | | | | | |
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1,160)) | * | Minus | ** | - | 1 | x s = | | OR | x s = | | |
| | Independent (37 CFR 1.16(h)) | | Minus | *** | - | | X \$ = | | OR | X \$ = | | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | 1 | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(ii)) | | | | | | | | OR | | . (| |
| # 15 the material regions of the least through a neglectic collision 2 units 100 | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | | |
| *** | *If the ontry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: #Ris-14(pidet Hamber Freewoodly, raid For INT THIS 8"ACE is less than 30; enter 30; #If the 14(pidet Hamber Prewoodly Pad For INT THIS SPACE is less than 3, enter 3. | | | | | | | | | | | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USP) to process) an application. Confidentially is governed by 38 U.S. C. 22 and 37 CFR 1.14. This collection is estimated to take 12 minutes for complete, including garbering, preparing, and submitting the completed application from to the USPrD. Time will vary depending upon the individual case. Any comment in the amount of time you require to complete this collection and or suggestions for reducing this further, should be sent to the Chef Information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, W.A. 22314-1450. Dox ON SEND PEES 90 COMPLETED FORMS OF This ST. ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.